

**WASHINGTON STATE PATROL FIRE PROTECTION BUREAU
OFFICE OF THE STATE FIRE MARSHAL**

APPLICATION FOR A PYROTECHNIC OPERATOR LICENSE

This application is hereby made to the Washington State Patrol Fire Protection Bureau, pursuant to R.C.W. 70.77, for an annual license in the State of Washington as a Pyrotechnic Operator. I have enclosed the annual licensing fee of \$ 10.00 and two letters of recommendation from the fireworks industry attesting to my ability.

Date Received

For Official Use

Applicant Seeking A Pyrotechnic Operator License:

Name					
Complete Address					
Social Security Number		Home Phone Number		Work Phone Number	
E-Mail Address				Age	

Six (6) Displays The Applicant Has Participated In As An Assistant (One Must Be In The Previous Year):

<u>DATE OF DISPLAY</u>	<u>LOCATION OF DISPLAY</u>	<u>PYROTECHNIC OPERATOR NAME AND PHONE NUMBER</u>	<u>LICENSE NUMBER</u>

Applicant Background Questions

Yes/No

Have you been cited for state or federal fireworks violations?

Have you been convicted of a felony or misdemeanor in the past ten years?

Have you forfeited a bond for a felony or misdemeanor in the past ten years?

Do you hold a current Fireworks License in another state? (If yes, please provide a copy)

Have you ever had a fire or accident as a result of fireworks activity?

Have you ever done damage to another's property as a result of fireworks activity?

Industry References Submitting Letters of Recommendation:

1)	Name		Phone Number	
	Complete Mailing Address			
2)	Name		Phone Number	
	Complete Mailing Address			

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Other Industry References Attesting To Applicants Experience And/Or Training:

1)	Name		Phone Number	
	Complete Mailing Address			
2)	Name		Phone Number	
	Complete Mailing Address			

List Any Training Or Experience That Has Increased Your Knowledge As A Potential Pyrotechnic Operator:

Any Additional Details Or Comments:

Upon verification of your requirements, you will be notified when an examination can be taken. After receiving a passing score, your Pyrotechnic Operator license will be issued.

This application is hereby made for a Pyrotechnic Operator License. In making this application, I agree to abide by all requirements of the State Fireworks Law (R.C.W. 70.77) and the rules and regulations (W.A.C. 212-17) of the Washington State Fire Marshal's Office. In addition, I authorize the release of information and/or documents relative to my training, experience and ability as Pyrotechnic Operator for your inspection.

I further certify that all information contained in this application is true and complete. I understand that omitted or misrepresented information can constitute sufficient grounds for denial or revocation of the license I am applying for.

Signature Of Applicant

Date of Application

Mail your completed application, letters of reference, copies of other licenses, documents, or certifications, and licensing fees to:

Washington State Patrol Fire Protection Bureau
Post Office Box 42600
Olympia, WA 98504-2600

[Please note these licenses are valid from the date of issue until January 31 of the subsequent year.]